PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

BEST AVAILABLE COPY

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000

INSTRUCTIONS: This form should be used for tra	insmitting the ISSUE FEE and PUBLICATION	FEE (if required). Blocks 1 through 5 sh	ould be completed where
appropriate. All further correspondence including the	Patent, advance orders and notification of mainte	enance fees will be mailed to the current	correspondence address as
indicated unless corrected below or directed otherwis	se in Block 1, by (a) specifying a new correspond	lence address; and/or (b) indicating a separ	rate "FEE ADDRESS" for
maintenance fee notifications.	ni province de la		

appropriate. All further cor indicated unless corrected by maintenance fee notification	respondence including the Poelow or directed otherwise	atent, advance or in Block 1, by (a	ders and notificatio) specifying a new	n of maintenance fees correspondence address	will be mailed to the curren s; and/or (b) indicating a sep	t correspondence address as parate "FEE ADDRESS" for	
04743 75	ORIVE 606	LLP DE	50	Fee(s) Transmittal. T papers. Each addition have its own certifica	f mailing can only be used this certificate cannot be used all paper, such as an assignment of mailing or transmission. ertificate of Mailing or Transmits being with sufficient postage for fail Stop ISSUE FEE address PTO (703) 746-4000, on the papel Le	for any other accompanying ent or formal drawing, mus	
FC:1504	300.00 OP			Must	tutall	(Signature)	
FC:1501 FC:8001	1400.00 OP 9.00 OP			December 2	27, 2004	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/900,420	07/06/2001	Paul		tteau	027906-0221	7143	
TITLE OF INVENTION: A	LBUM PAGE						
APPLN, TYPE	SMALL ENTITY	ISSUE FI		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	nonprovisional NO \$140		0	\$300	\$1700	01/05/2005	
EXAM	INER	ART UN	IT (CLASS-SUBCLASS]		
DAVIS, CASSANDRA HOPE		3611 0-		040-537000			
CFR 1.363). Change of correspond Address form PTO/SH/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND	∃ E	correspondence ion form of a Customer E PRINTED ON Tow, no assignee of this form is NOT	(1) the names of or agents OR, alt (2) the name of a registered attorned 2 registered pater listed, no name where PATENT (print data will appear on a substitute for fility) RESIDENCE: (CI	a single firm (having as ey or agent) and the nar at attorneys or agents. I will be printed.	a member a nes of up to f no name is a Borun mee is identified below, the	ein & LLP	
	, ,	ies (will not be pri	·		Composition or other private of	roup antitu D Course	
Please check the appropriate assignee category or categories (will not be 4a. The following fee(s) are enclosed: State Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies		4b	A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-2855 (enclose an extra copy of this form).				
a. Applicant claims SM	(from status indicated above) MALL ENTITY status. See 3	7 CFR 1.27.			ALL ENTITY status. See 37 (
NOTE: The Issue Fee and Pu	is requested to apply the Issue ablication Fee (if required) words of the United States Pater	III not be accepted	l from anyone other	o re-apply any previous than the applicant; a reg	sly paid issue fee to the applic gistered attorney or agent; or	ation identified above. the assignee or other party in	
Authorized Signature / head from			Date December 27, 2004				
Typed or printed name Matthias Abrell			Registration No. 47,377				
This collection of information an application. Confideialing the completed ap	n is required by 37 CFR 1.31 ty is governed by 35 U.S.C. plication form to the USPTC	1. The information 122 and 37 CFR 1 3. Time will vary	n is required to obta 1.14. This collection depending upon the	in or retain a benefit by is estimated to take 12 individual case. Any c	the public which is to file (ar minutes to complete, includi comments on the amount of t	nd by the USPTO to process) ng gathering, preparing, and ime you require to complete	

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Varginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Varginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.